



## Power Data Form

(For LPC Service in Boulder County outside Longmont city limits)

**All information must be filled out prior to submittal. Uncompleted forms will be returned for completion.**

Permit Number: \_\_\_\_\_ Date: \_\_\_\_\_

Project Address: \_\_\_\_\_

Owner/Agent: \_\_\_\_\_ Phone: \_\_\_\_\_

Project Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

(If other than Owner) \_\_\_\_\_ Fax: \_\_\_\_\_

Electrician: \_\_\_\_\_ Phone: \_\_\_\_\_

### Party Responsible for Payment of Construction, Connection and Metering Costs

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

### Party Responsible for Payment of Monthly Utility Bill

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Project Description: \_\_\_\_\_

Commercial services or requests for utility interconnection require an Electrical One-Line Diagram stamped by a Professional Engineer. All relocations require a simple sketch showing the existing and proposed meter location.

Service	Temp Power	Breaker Upgrade	Heat Source	AC	Tons	Interconnection
New <input type="checkbox"/>	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>	Gas <input type="checkbox"/>	Yes <input type="checkbox"/>		Net Metering
Change <input type="checkbox"/>	No <input type="checkbox"/>	No <input type="checkbox"/>	Electric <input type="checkbox"/>	No <input type="checkbox"/>		Yes <input type="checkbox"/>

### Facilities Description

	Existing	Proposed
1. Voltage	<input type="checkbox"/> 1-phase 120/240 <input type="checkbox"/> 1-phase 120/208	<input type="checkbox"/> 1-phase 120/240 <input type="checkbox"/> 1-phase 120/208
2. Type of service	<input type="checkbox"/> OH <input type="checkbox"/> UG	<input type="checkbox"/> OH <input type="checkbox"/> UG
3. Total number of electric meters	_____	_____
4. Panel rating at each meter	_____	_____
5. List full frame ampacity of main disconnect (if applicable)	_____	_____
6. Number of conductors and size	_____	_____
7. Horsepower of largest motor	_____	_____

### FOR LPC USE ONLY

Administration: Payment received: \_\_\_\_\_ Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

Engineering: Workorder number: \_\_\_\_\_ Field Engineer: \_\_\_\_\_

Meter Shop: Meter Technician: \_\_\_\_\_ Date: \_\_\_\_\_